MEMORANDUM

Agenda Item No. 11(A)(20)

TO:

Honorable Chairman Joe A. Martinez

and Members, Board of County Commissioners

DATE:

January 24, 2006

FROM:

Murray A. Greenberg

County Attorney

SUBJECT:

Resolution retroactively

authorizing in-kind services from the Park & Recreation

Dept. for the Festival

Navideño

The accompanying resolution was prepared and placed on the agenda at the request of Chairman Joe A. Martinez.

County Attorney

MAG/bw

TO: Honorable Chaire

Honorable Chairman Joe A. Martinez

DATE:

January 24, 2006

and Members, Board of County Commissioners

FROM:

Murray A. Greenberg

County Attorney

SUBJECT: Agenda Item No. 11(A)(20)

Please note any items checked.

	"4-Day Rule" ("3-Day Rule" for committees) applicable if raised
	6 weeks required between first reading and public hearing
	4 weeks notification to municipal officials required prior to public hearing
	Decreases revenues or increases expenditures without balancing budget
	Budget required
	Statement of fiscal impact required
	Bid waiver requiring County Manager's written recommendation
	Ordinance creating a new board requires detailed County Manager's report for public hearing
-	Housekeeping item (no policy decision required)
	No committee review

Approved	Mayor	Agenda Iter	m No. 11(A)(20)
Veto		1-24-06	
Override			
	RESOLUTION NO.		

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE MIAMI-DADE PARK AND RECREATION DEPARTMENT FOR TEAM METRO TAMIAMI'S DECEMBER 3, 2005 FESTIVAL NAVIDEÑO IN AN AMOUNT NOT TO EXCEED \$2876.00 TO BE FUNDED FROM THE DISTRICT 11 IN-KIND RESERVE FUND

WHEREAS, Team Metro Tamiami has requested in-kind services from the Miami-Dade Park and Recreation Department for the December 3, 2005 Festival Navideño in an amount not to exceed \$2876.00 (see attached Fee Waiver/In-Kind Service Application); and

WHEREAS, the Festival Navideño is a special event, as that term is defined in the attached Fee Waiver/In-Kind Service Application, and the in-kind services shall be funded from the District 11 In-kind Reserve Fund,

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF MIAMI-DADE COUNTY, FLORIDA, that this Board retroactively authorizes in-kind services from the Miami-Dade Park and Recreation Department for Team Metro Tamiami's December 3, 2005 Festival Navideño in an amount not to exceed \$2876.00 to be funded from the District 11 In-kind Reserve Fund.

The foregoing resolution was sponsored by Chairman Joe A. Martinez and offered by

Commissioner , who moved its adoption. The motion was seconded by

Commissioner and upon being put to a vote, the vote was as follows:

Agenda Item No. Page No. 2

11(A)(20)

Joe A. Martinez, Chairman Dennis C. Moss, Vice-Chairman

Bruno A. Barreiro Audrey M. Edmonson Sally A. Heyman Dorrin D. Rolle Katy Sorenson Jose "Pepe" Diaz Carlos A. Gimenez Barbara J. Jordan Natacha Seijas Rebeca Sosa

Sen. Javier D. Souto

The Chairperson thereupon declared the resolution duly passed and adopted this 24th day of January, 2006. This resolution shall become effective ten (10) days after the date of its adoption unless vetoed by the Mayor, and if vetoed, shall become effective only upon an override by this Board.

MIAMI-DADE COUNTY, FLORIDA BY ITS BOARD OF COUNTY COMMISSIONERS

HARVEY RUVIN, CLERK

By:	
Deputy Clerk	

Approved by County Attorney as to form and legal sufficiency.

DOC

Diamela del Castillo

Message

Page 1 of 1

Regula, Pamela (COM)

From: Gonzalez, Ana (MDPR)

Sent: Tuesday, November 22, 2005 11:53 AM

To: Regula, Pamela (COM)

Cc: Dingler, Pete (MDPR); Barba, Essie (MDPR)

Subject: Team Metro In-Kind Request - Dec. 3, 2005

Pam, the cost for Team Metro's request is \$2,876.00.

Following is the break-down: Showmobile (large old) \$1,026.00

Two Bounce Houses* \$370.00

Medium Sound with \$1,480.00 Sound Tech.

* Team Metro must follow the Bounce House General Rules (copy attached)
Must provide attendants for the bounce houses requested. Attendant must have a current First Aide/CPR certificate, keep a first aid kit next to unit while in use and must keep radio with the unit or have telephone access for emergency calls

NOTE: Bounce House General Rules must be returned to Pete Dingler with the signature(s) of Team Metro acknowledging rules.

Thanks

Ana I. Gonzalez, Parks Admin, Coordinator
Miaml-Dade County Park and Recreation Department
(305) 755-7958
miamidade.gov/parks
"Delivering Excellence Every Day"

P.5/6

305 222 2137 Team

Team Metro

06 01 24 p.m. 11-17-2005

Darks - #2876.

MIAMI-DADE COUNTY FEE WAIVERIN-KIND SERVICES APPLICATION

COUNTY FEE WAIVERS OR IN-KIND SERVICES REQUESTED THROUGH THIS PROCESS ARE NOT EFFECTIVE UNTIL APPROVED BY ACTION OF THE BOARD OF COUNTY COMMISSIONERS PURSUANT TO THE MIAMI-DADE COUNTY HOME RULE CHARTER

ase complete the follow				1.
Comm 111 N	ol Events Staff nunications Department .W. 1 ^{al} Street, Suite 2510 , FL 33128	Phone; Fax:	(305) 375-2836 (305) 375-3968	
se of Event/Application	(select one of the following):			
☐ District Event -	Event of minimal impact related to specific commis	sion district (Comple	ete questions 1-7, sign and	date; copy will be
submitted to the appropriate District Commissioner within two days of receipt of application.) Small Event - Event of minimal impact not necessarily related to a specific commission district. (Complete questions 1-7,		tions 1-7, sign and		
Special Event -	date.) Event with expected attendance of less than 5,000 municipality (Complete questions 1-12, sign, date) with localized impa	ct limited to an individual o	ommunity or
☐ Major Event -	Large Event with expected attendance of over 5,0 vandalism (Complete questions 1-12, sign, date a	00 or significant prol	bability of protests, controv	ersy, violence or
Full legal name of th	e requesting organization: TEAM &	TETRO TE	miami	
Applicant Status: (Se	elect one of the choices below)			
☐ For-P	or-Profit or Tax Exempt	Local Governmen	•	
Other Name and contact in	ty Sponsored Event/Sponsoring Department 15 (specify); (formation for single point of contact (address, phon	e, fax, e-mail addres	s, etc.): <u>Joe С</u> н	AO (305)437-53
Name and contact in	(specify);	e, fax, e-mail addres	s, etc.): <u>Joe CH</u> 2-2137	
Specify fee walver o	Iformation for single point of contact (address, phone contact (address))).	e, fax, e-mail address: (305)-225 PORTABLE fund-raiser, define t	s, etc.): 505 CH 2-2137 STAGE 2 130	
Specify fee walver of ALL SATUR	Iformation for single point of contact (address, phone of contact (address))).	fund-raiser, define to PUBLIC ON	s, etc.): JOE CH 2-2137 STAGE, 2 130 the beneficiaries):	DUNCE HOUSES
Specify fee walver of Some Auto Some Source of event Source Combo	Iformation for single point of contact (address, phone of contact (address))).	fund-raiser, define to PUBLIC ON	s, etc.): JOE CH 2-2137 STAGE, 2 130 the beneficiaries):	DUNCE HOUSES
Name and contact in HAO A SPECIFY fee walver of AND SO Name, date of event COMP	Iformation for single point of contact (address, phonomican for single point of contact for single point of	fund-raiser, define to PUBLIC ON	s, etc.): JOE CH 2-2137 STAGE, 2 130 the beneficiaries):	DUNCE HOUSES
Name and contact in HAO (a) Specify fee walver of AHD SO Name, date of event COMP THE ANNUAL Please select ALL to Healt of life	Iformation for single point of contact (address, phone of contact (address))). If address	fund-raiser, define to the tocal econor offers educational indicates and/or so	s, etc.): JOE CH 2-2137 STAGE 2 130 the beneficiaries): TIVAL 1 WHAT LIFFERE	DINCE HOUSES
Name and contact in HAO A Specify fee walver of AND Name, date of event COMP Please select ALL to Healt of life Arts Envir	Iformation for single point of contact (address, phone of contact (address)) address (address) address	fax, e-mail address: (305) 225 PORTA LLE fund-raiser, define to the tocal econor offers educational red causes and/or so the promotes conserver.	s, etc.): JOE CH 2-2/37 STAGE 2 30 the beneficiaries): TIVAL 1 WHAT SIFFERE THE STAGE 2 130 The benefits clair programs or institutions attorn	DINCE HOUSES

6

P.6/6

MIAMI-DADE COUNTY FEE WAIVER/IN-KIND SERVICES APPLICATION

3, 1	Description of regional or local impact: MALE BORLLACE AWARE OF COUNTY ECRVICES, MEDICAL SERVICES F SOCIAL SERVICES IN THE AREA.	
) .	Delly/hourly event schedule, including set-up and breakdown schedule (attach event calendar, if applicable): 12:00 Pm ーイ 9 Am SETいら 4 Pm BREAK-2012 N	DO PM (ENER
16 .	Detailed description of event venues (map or schematic of event venues, access points, surrounding roadways and traffic flow diagrapplicable): らっていること	ams, if
11.	Expected number of participants and estimated attendance (per day, if applicable): 500 - 1,000	
12.	Itemized budget, including total event budget, total budget of host organization, if applicable, and total commitment of resources (at additional pages as needed);	ach .
	reby certify that all the statements made in this application are true and correct Rese Dias nature of Authorized Representative	
Dat	NOV. 17 2005	:

Page 2 of 2 Revised: 10/8/2005

7





Date:

January 24, 2006

To:

Honorable Chairman Joe A. Martinez

and Members, Board of County Commissioners

From:

George M. Burges
County Manager

Subject:

District Specific In-Kind Reserve Request Recommendation

The Office of Strategic Business Management (OSBM) has reviewed the attached in-kind request and recommends for the item to move forward to the Board of County Commissioners for consideration. The district specific in-kind reserve balance allows for the funding of this request.

Background

A retroactive waiver for in-kind services is being requested from Miami-Dade County Team Metro Department's Tamiami Office for their Festival Navideño, held on December 3, 2005.

In-kind services have been requested in an amount of \$2,876 from the Park and Recreation Department for the portable stage, two bounce houses and a sound system. This event will be funded from District 11's district specific in-kind reserve.

In FY 2005-06 Team Metro's Tamiami Office has not received any County funding for this event.

inkind01506

